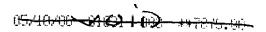
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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THE WAY TO AM 8: 56

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COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: WJL Associates, Inc.
(Name of corporation - must include suffix)
Dear Sir or Madam:
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.
Please return all correspondence concerning this matter to the following:
Christopher Stulb
(Name of Person)
WJL Associates, Inc.
(Firm/Company)
200 Clarendon St. 50th Floor
(Address)
Boston, MA 02116
(City/State and Zip code)
For further information concerning this matter, please call:
Christopher Stulb at (617) 247-7000
(Name of Person) (Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314
Enclosed is a check for the following amount:
\$70.00 Filing Fee \$\sum \\$78.75 Filing Fee & \$\sum \\$78.75 Filing Fee & \$\sum \\$87.50 Filing Fee, Certificate of Status & Certified Copy Certificate Of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")	
Lymph 9 Appointed Inc	
Lynch & Associates, Inc.	m1:(J_)
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in I	rionda)
2. Massachusetts 3. 20-4160105	
(State or country under the law of which it is incorporated) (FEI number, if applicable)	
4. January 10, 2006 5. Perpetual	
(Date of incorporation) (Duration: Year corp. will cease to exist or "perp	etual")
6. February 22,2006	
(Date first transacted business in Florida, if prior to registration) (SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)	
₇ 200 Clarendon St., 50th Floor Boston, MA 02116	190 150 150 150 150 150 150 150 150 150 15
(Principal office address)	3-2
200 Clarendon St., 50th Floor Boston, MA 02116	5 3
(Current mailing address)	
Consulting conjugation on executive honefit programs	3
8. Consulting services on executive benefit programs (Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)	~2, − ≥ =
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)	
Name: Michael Longino	
Office Address: One Progress Plaza, Suite 2210	
St. Petersburg _{Florida} 33701	
St. Petersburg , Florida 33701 (City) (Zip code)	
10. Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated corporation designated in this application, I hereby accept the appointment as registered agent and agree to act in th further agree to comply with the provisions of all statutes relative to the proper and complete performant and I am familiar with and accept the obligations of my position as registered agent.	is capacity. I

^{11.} Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

, •		
12. Names and business addresses of officers and/or directors:		
A. DIRECTORS		
Chairman:		
Address:	···	
Vice Chairman:		
Address:		
Director: William J. Lynch		
Address: 200 Clarendon St., 50th Floor Boston, MA 02116	06 HAY	
Director:		
Address:	— 8: 56 — 56	
B. OFFICERS		ਨਾ T
President: William J. Lynch		
Address: 200 Clarendon St. 50th Floor		
Boston, MA 02116		
Vice President:		
Address:		
Secretary: William J. Lynch	 -	
Address: 200 Clarendon St., 50th Floor Boston, MA 02116		
Treasurer: William J. Lynch		
Address: 200 Clarendon St., 50th Floor Boston, MA 02116		
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or of the second	directors.	
(Signature of Director or Officer listed in number 12 of the application)		
14. William J. Lynch, 1705. (Typed or printed name and capacity of person signing application)		
(1) has or primes mand and deputed of person signing approached)		



The Commonwealth of Massachusetts

Secretary of the Commonwealth

State House, Boston, Massachusetts 02133

April 26, 2006

TO WHOM IT MAY CONCERN:

I hereby certify that

WJL ASSOCIATES, INC.

appears by the records of this office to have been incorporated under the General Laws of this Commonwealth on January 12, 2006.

I also certify that so far as appears of record here, said corporation still has legal existence.

SECRETAIN OF AVIN 90 29

ranio Galecin



In testimony of which,
I have hereunto affixed the
Great Seal of the Commonwealth
on the date first above written.

Secretary of the Commonwealth

Processed by to